

Attorney Docket No. 090455-9319

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. of
Jeffrey G. Rehkemper et al.

Application No. 10/056,676

Filed: January 24, 2002

For: "INTERACTIVE BATTLING ROBOTS
WITH UNIVERSAL VEHICAL
CHASSIS"

Art Unit: 3712

Examiner: Jamila O. Williams

Confirmation No. 1028

Customer No. 1131

I, Elizabeth M. Campbell, hereby certify that this correspondence is being deposited with the US Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date of my signature.

Elizabeth M. Campbell
Signature

4/29/2004

Date of Signature

RESPONSE TO OFFICE ACTION DATED MARCH 2, 2004

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

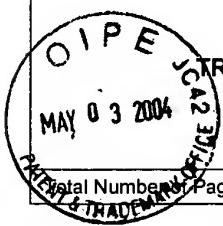
Sir:

In response to the Final Office Action of March 2, 2004, please amend the above identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Drawings begin on page 9 of this paper and includes amended sheet submitted herewith.

Remarks begin on page 10 of this paper.



Zpw

*AF
3112*

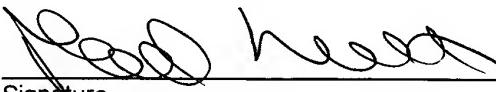
TRANSMITTAL FORM		Application Number	10/056,676
		Filing Date	January 25, 2002
		First Named Inventor	Jeffrey G. Rehkemper
		Art Unit	3712
		Examiner Name	Jamila O. Williams
Number of Pages in This Submission	54	Attorney Docket Number	090455-9319

ENCLOSURES (check all that apply)		PETITION FOR EXTENSION OF TIME	
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> Before Final <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declarations <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO-1449 Form(s) <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other: Corrected Drawings		This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. <input type="checkbox"/> Applicant(s) claims small entity status under 37 CFR 1.27. <input type="checkbox"/> Applicant(s) petitions for a three-month extension of time and pay the fee of \$475.00 (37 CFR 1.17(a)(1)-(5). <input checked="" type="checkbox"/> Applicant(s) believes that no petition for an extension of time is necessary (37 CFR 1.36(c)); however, applicant(s) hereby petition for sufficient extension of time to render the present submission timely.	

CLAIMS FEES							
<input checked="" type="checkbox"/> No additional claim fee is required.							
	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims Present	Rate	Small Entity Addit. Claim Fee	Large Entity Addit. Claim Fee
Total	13	-	20	=0	x 9=	\$	x 18= \$0
Independent	3	-	3	=0	x 43=	\$	x 86= \$0
<input type="checkbox"/> First Presentation of Multiple Claim					+ 145=	\$	+ 290= \$0

ENCLOSED FEES							
<input type="checkbox"/> Additional Claim Fee <input checked="" type="checkbox"/> Extension fee for one-month <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Surcharge for Missing Parts – Declaration <input type="checkbox"/> Terminal Disclaimer							\$.00
							\$0.00
							\$0.00
							\$0.00
							TOTAL FEES ENCLOSED \$.00

PAYMENT OF FEES							
<input type="checkbox"/> A check in the amount of \$.00 is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1965. <input type="checkbox"/> The Director is authorized to charge Deposit Account Number 50-1965 in the amount of \$.00.							

SIGNATURE OF ATTORNEY	
David R. Morris, Reg. No. 53,348 MICHAEL BEST & FRIEDRICH, LLP 401 North Michigan Avenue Suite 1900 Chicago, Illinois 60611 Telephone: (312) 222-0800 Facsimile: (312) 222-0818	 Signature Date: April 29, 2004

CERTIFICATE OF TRANSMISSION/MAILING							
I hereby certify that this correspondence is:							
<input type="checkbox"/> being facsimile transmitted to the USPTO, facsimile number (703) 872-9306. <input checked="" type="checkbox"/> deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.							
Typed or printed name	Elizabeth M. Campbell	Date	April 29, 2004	Time	10:00 AM	AM/PM	
Signature	<i>Elizabeth M. Campbell</i>			Date	April 29, 2004	Time	10:00 AM